

Making Health and Health Care Equal for All

What exactly are health disparities? And how can they be reduced or eliminated?

At the Food and Drug Administration (FDA), achieving equality in health and health care is part of the mission of the Office of Minority Health (OMH). The office was established in 2010 by the Affordable Care Act to help the agency address the needs of Americans who may be more vulnerable because of their race, ethnicity or other factors.

Health disparities, according to a report issued by the U.S. Department of Health and Human Services (HHS), are differences in health that are associated with social, economic and environmental disadvantages. The National Institutes of Health defines them as differences in “the incidence, prevalence, mortality and burden” of diseases among certain population groups.

“FDA has an important role in decreasing health disparities that is integral to our mission to protect and promote the public health,” says OMH Director Jonca Bull, M.D. “But to identify health disparities, you have to have good data.”

Getting the data that will provide FDA, HHS and other federal agencies a real picture of what health dis-



April is Minority Health Month

FDA's Office of Minority Health (OMH) helps identify agency actions that can help reduce disparities in health and health care. There will be several Consumer Updates this month highlighting the work of this office:

- The work being done to lessen health disparities
- The importance of including minorities in clinical trials
- Research and collaborations

To read these Consumer Updates, go to: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm347896.htm>

And to learn more about OMH Director Jonca Bull's perspective on her office's top priorities, go to: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm335589>

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parities exist in the United States is at the core of OMH’s work. “You can’t manage what you can’t measure,” says Bull.

What We Do Know

There can be many causes of health disparities, says Bull. They range from underlying genetics to socio-economic status, lack of insurance and lack of access to quality health care, including preventive care and follow-ups when a disease is diagnosed. And this can be complicated by limited English proficiency, which can affect the quality of a patient’s interaction with a health care professional.

Bull explains that there are certain core areas of concern. Here are some examples of disparities in those areas from federal studies:

- **Heart health:** African American women and men have significantly higher rates of death from coronary heart disease than do people of other races.
- **Cancer:** Triple negative breast cancer—a type that can be more aggressive and difficult to treat—occurs more frequently in African American women and is associated with younger people.
- **Hepatitis B:** Asians and Pacific Islanders account for more than 50 percent of Americans living with chronic hepatitis B and related cancers.
- **Diabetes:** Native American women are almost twice as likely to die of diabetes as non-Hispanic white women. Hispanics are also disproportionately affected by diabetes.

And those are just a few of the areas in which there is a marked difference in the health of minority populations, which also have higher rates of obesity, asthma, preventable hospitalizations and infant deaths.

What OMH is Doing

The Affordable Care Act created five other minority health offices within HHS, located at: the Centers for Disease Control and Prevention, the Health Resources and Services Administration, the Substance Abuse and Mental Health Administration, the Agency for Healthcare Research and Quality, and the Centers for Medicare and Medicaid Services.

FDA works in partnership with its counterparts in HHS but as a regulatory agency, its role is unique in bringing about changes that could help level the playing field when it comes to health and health care.

Essentially, everything FDA’s OMH does is related to fighting racial and ethnic health disparities:

- Enhancing diversity on FDA’s scientific advisory committees is one area of focus, involving the recruitment of independent experts who have a scientific background in related health fields and expertise in the areas of minority health and health disparities. These advisory committees provide advice on health and science policy issues.
- In December 2012, the Summit on the Science of Eliminating Health Disparities attracted more than 4,500 people and featured more than 100 workshops. The summit

was led by the National Institute on Minority Health and Health Disparities and co-sponsored by OMH and HHS. Highlights of the conference will be featured in a future publication on best practices for reducing health disparities on a broad scale.

- OMH works with health care professionals and patient advocates to increase minority representation in clinical trials of medical products.
- The office partners with universities to advance the study of, and research into, health disparities and the regulatory science that is the foundation of FDA’s decisions.

“This is really about having good data and ensuring the best health outcomes for all Americans,” Bull says.

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